



## Editorials

### Socialization of Healthcare/Slice by Slice

**Norman Goldstein MD**  
Editor

Richard Kelley, MD was and still is a pathologist. For many years, he worked with Drake Will, MD and Ann Catts, MD, and with Hawaii Pathologists' Laboratory at Queen's Medical Center.

His father, the late Roy Kelley, and mother, Estelle, began operating a small hotel in Waikiki years ago. Their hotel grew into a major chain - the Outrigger Hotels of Hawaii and Guam.

When the Outrigger organization needed help, Richard Kelley left medicine. No more autopsies, stains and slides for him. Rich performed surgery with the Outrigger organization and helped it to become the leading hotel complex in the Pacific.

As you will see in Dr. Kelley's Special Commentary on page 496, "The Socialization of Healthcare, Slice by Slice," he is still using his microtome. Thanks to *Pacific Business News* for permission to reprint his commentary.

**THIS MONTH:** We conclude our series on Common Sports Injuries as seen by the primary care physician in this Issue. The review by James Scoggin II, M.D. is an excellent manual for emergency rooms, pediatricians, and family practice offices.

S.Y. Tan, MD and Todd Kubo, MD are eminently qualified to answer some very important medial and legal questions dealing with HIV infections, as they do in this Issue. They are not only experienced physicians, they each have a "JD" after their "MD"s.

S.Y. Tan is also well know to Hawaii physicians, serving as Director of the Medical Ethics Dept. at St. Francis Medical Center, and as sponsor and director of many seminars dealing with medical ethics.

**NEXT MONTH:** The results of Dr Len Howard's survey of physicians as well as the Star-Bulletin/NBC Hawaii News Channel 8 surveys on Death with Dignity will be discussed.



## President's Message

### What Do We Want to Be? A Health Care Industry or the Profession of Medicine?

**Leonard Howard MD**

As I meet with various organizations that currently take a part in the delivery of medical care to the people of Hawaii, I am struck with the new "Politically Correct" terminology that is being used in oral and written communication. We are said to be "Health Care Providers" in the "Health Care Industry." We are given templates for creating medical records, so the complexity of our care delivered can be evaluated "objectively" to justify our claim for reimbursement. We are relegated to the Department of Human Resources in the new rules of compliance for Medicare Hospitals. We are no longer the determining factor in the quality of medical care delivered in the hospital. We are faced every legislative session with an avalanche of proposed legislation by which other "health care providers" will be able to carry out the same function previously restricted to Doctors of Medicine, simply in the name of "cost cutting."

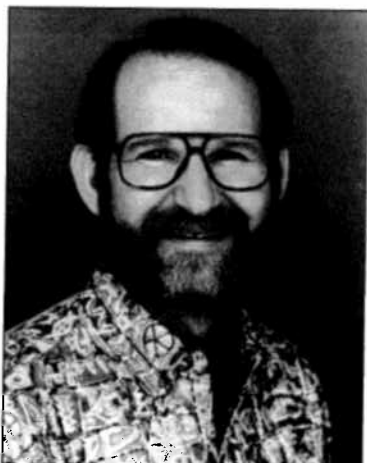
Looking at this situation from the perspective of organized medicine, I can only urge you to resist this denigration of our profession before it is too late. We are Physicians, Doctors of Medicine. We are not Health Care Providers, equated with nurses, chiropractors, and massage therapists. We do not have clients, we care for patients. The Oath of Hippocrates is meaningless in a service industry where everything is done according to protocols, checklists, and cook books. Privacy of Medical Records has no meaning to a clerk in a health insurance company who needs to see how many blocks can be checked off on her claim form to determine if the care was appropriate.

Colleagues, we have allowed this to happen to us. We have sat in our offices, telling each other learnedly "I just want to practice medicine. I have not got time to get involved in all that organized medicine stuff." As a result, your HMA counts less than half the physicians of Hawaii as members and the above situation exists.

It is time for us to say "Enough!" We are physicians, not health care providers! We practice the profession of medicine! We are not just members of a service industry. We care for our patients. We do not service clients.

There is another side to this issue however. If we demand to be treated as professionals, then we must act like professionals. There is no place in the profession of medicine for creative coding, 36 hours a day billing, and the other forms of fraud that have resulted in creation of Medicare Fraud Units. We cannot sit by and tolerate behavior by our colleagues that is non-professional. Peer Review means just that, we care about how medicine is practiced.

We have a choice to make. Are we going to be a profession, with all that entails, or are we going to be part of a big service industry? If



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Pacific Tower, Suite 2944, 1001 Bishop Street

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